CHESTER-LE-STREET RURAL DISTRICT COUNCIL

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR 1947.

CHESTER-LE-STREET:
LAMBTON PRESS, BRIDGE END

1948

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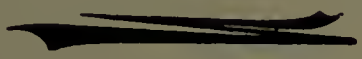

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SYNOPSIS

CHESTER-LE-STREET RURAL DISTRICT COUNCIL.

HEALTH DEPARTMENT,
CHESTER-LE-STREET,
13TH SEPTEMBER, 1948.

To the Chairman and Members of the Chester-leStreet Rural District Council.

Ladies and Gentlemen,

I have the honour to present the Annual Report on the health and sanitary condition of the Rural District for the year ending 31st December, 1947.

The report is drawn up on the lines suggested by the Ministry of Health, and is an ordinary report.

The birth rate has decreased, and there has been a slight increase in the death rate. Over 50% of the total deaths occurred in persons aged 65 and over.

A slight increase in the infant mortality rate has occurred.

The incidence of the notifiable diseases has again been reduced. After correction only 12 cases of diphtheria arose in the district. This new low level has never been reached in the Rural District before. I believe that great credit must be given to the immunisation campaigns which have been held in the district, and it is hoped that when 90% of the susceptible child populations is protected against diphtheria, that this disease will cease to exist. Revised figures were obtained giving the true picture regarding the position of immunisation as follows:—34% of the children aged 1—5 years, and 81% aged 5—15 years immunised, at the end of the year. A continued effort is being made to bring the numbers in both cases to over 90%

The number of notifications received of new cases of Tuberculosis was less than in the previous year, and there was a further decrease in the number of deaths from pulmonary Tuberculosis.

The number of deaths from cancer during the year showed an increase; this disease must continue to receive our full effort with a view to its reduction and cure.

I would again like to draw members attention to Table 5A, which gives comparative figures for Vital Statistics appertaining 25 and 50 years ago. These figures reveal the enormous strides which Public

Health has taken during the past 50 years. These comparative figures demonstrate the success of the environmental health Services provided by Local Authorities, and full credit must be awarded to General Practitioners who had also played an important part in the reduction of mortality figures

Housing conditions in the area still far from satisfactory; fortunately a number of families were rehoused during the year.

A large number of houses are urgently required in the district to house the population, since many at present occupied are totally unfit for human habitation, and immediately the opportunity arises, steps will be taken to sweep this type of property away.

Overcrowding is still prevalent, and will continue to be so, until sufficient houses have been erected to relieve the situation.

There is also an urgent necessity for additional hospital beds for Tuberculosis and maternity cases, which becomes more pressing when attention is drawn to the acute housing shortage.

The purity of water supplies, cleanliness of milk and ice cream, continue to receive the careful supervision of your Sanitary Officers.

I offer my thanks to the Sanitary Inspectors' for their help and co-operation during the year. The section of the report dealing with Sanitary Inspection of the area, and the supervision of Food is the work of the Sanitary Inspectors, and a reference to this part of the report will show that this work has been carried out with care.

During the year, Chester-le-Street Rural District shared in the general epidemic of poliomyelitis throughout the country, but the ultimate effect were slight, with an attack rate of only 0.3 per 1,000, of the population.

For further details reference can be made to the appropriate heading in the Annual Report.

A careful watch is being maintained for any further tendency to increased incidence of this disease in the area.

I would like to avail myself of this opportunity of thanking the Chairman and Members of the Council for their continued help and support.

I am, Ladies and Gentlemen,

Your obedient Servant,

J. D. TRAIL,

Acting Medical Officer of Health.

ANNUAL HEALTH REPORT.

PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY.

MEDICAL OFFICER OF HEALTH—
GAVIN MILLAR, M.B., Ch.B., B.Hy., D.P.H.

SANITARY INSPECTORS:—
TOM SAYER, M.R.S.I.

CHARLES W. ROBSON, C.R.S.I., and Certificate in Meat Inspection of the R.S.I.

A 50 % grant is payable in respect of the salaries of the Medical Officer of Health and the Sanitary Inspectors.

SECTION A.—STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area.

The area of the district at 31st December, 1947. remains the same as last year, namely 23261 acres. This gives a density of population of 1.76 persons per acre. The density of population in the various parishes is shown on Table 8.

Population.

The Registrar General's estimate of the population for the Rural District for mid-year 1947 is 40,970. This is 250 more than the population for 1946, but less than the estimated mid-year population of 1939, which was 42,150.

Inhabited houses.

The Number of inhabited houses according to the rate book at the end of the year was 11,008. Number of houses occupied at Census 1931. was 12,026.

Rateable Value.

The rateable value of the district on the 31st December, 1947 was £162,389, and a penny rate represented the sum of £673.

Social Conditions.

Little can be added to what was said in the last year's Annual Report.

Coal mining, with which are associated coke burning, and manufacture of bricks, tiles and drain pipes, continue to be with agriculture the chief industries of the district.

It is pleasing to note the industrial development within your area. Work is now progressing on one large factory on your section of the Team Valley Trading Estate; a large extension to a major factory in Birtley, and the construction of the new Cable Works at Newtown Birtley. This will of course, tend to absorb a large number of the female population of the area.

Bad housing conditions and overcrowding remain with us and are important factors in the slow recovery in the social condition of the people. Fortunately, progress has been made with housing, a number of permanent and temporary dwellings being completed and tenanted during 1947, particulars of which are given under section D-Housing, which has helped in a small way to relieve the acute housing shortage in the Rural district.

Extracts of Vital Statistics.

Live Births:

	Total.	M.	F.
Legitimate	804	410	392
Illegitimate	41	27	14

Birth rate per 1,000 of the estimated resident population ... ... 20·6

Still Births:

Rate per 1,000 total (live and still) births ... 29·9

	Total.	M.	F.
	26	16	10

Deaths	482	266	216

Death rate per 1,000 of the estimated resident population 11.7

Deaths from puerperal causes (headings 29 and 30 of the Registrar-General's Short List):—

	Deaths.	Rate per 1,000 total (live and still) births.
No. 29 Puerperal Sepsis ...	1	1·14
No 30 Other Puerperal causes	—	—
Total	1	1·14

Death rate of infants under one year of age:—

All Infants per 1,000 live births	56
Legitimate infants per 1,000 legitimate live births ...	53
Illegitimate infants per 1,000 illegitimate live births ...	122
Deaths from Cancer (at all ages)	73
Deaths from Measles (at all ages)	1
Deaths from Whooping Cough (all ages)	—
Deaths from Diarrhœa (under 2 year of age)	9

Vital Statistics.

TABLE 1.

The following table gives the vital statistics of the district for 1946 and previous years:—

Year.	Estimated Resident Population Mid-Year.	Births.		Deaths.		Infant Mortality Rate.	Maternal Mortality Rate.
		No.	Rate.	No.	Rate.		
1938	43,030	741	17·2	446	10·4	55	2·63
1939	42,150	642	15·1	508	12·0	82	9·03
1940	40,080	750	17·5	509	12·7	64	4·00
1941	39,450	730	17·4	511	12·9	70	1·39
1942	38,610	661	16·4	500	12·9	89	1·51
1943	38,110	695	17·3	484	12·7	70	4·32
1944	38,780	808	20·0	449	11·6	75	3·72
1945	39,190	778	19·0	480	12·2	64	2·57
1946	40,720	907	21·4	452	11·1	47	0·00
1947	40,970	845	20 6	482	11·7	56	1·14

Births.

62 less births were registered in the area during the year than in 1946. The birth rate for the past year is less than in the previous year, but still higher than in the past decade.

Deaths.

482 deaths were registered in the area during the year, equal to a death rate of 11.7 per 1,000 of the population per annum. There has been a slight increase in the death rate during the past year.

Included in the total number of deaths are those of 137 residents of this district who died outside the area. Eleven residents of other districts who died in the rural area are excluded.

TABLE 2.

The death rates for the various townships were as follows :—

Township.	Population.	No. of deaths.	Death rate per 1,000 Population.
Biddick South ...	41	—	—
Birtley	10827	134	12·38
Bournmoor ...	1773	15	8·50
Edmondsley ...	2005	9	4·49
Harraton ..	3078	38	12·35
Lambton ...	104	5	48·08
Lamesley ...	3665	35	9·55
Lumley Great ...	1406	20	14·23
Lumley Little ...	1435	21	14·63
Ouston	1055	12	11·37
Pelton	6280	77	12·26
Plawsworth ...	1336	14	10·48
Urpeth	2371	22	9·28
Waldridge ...	752	11	14·63
Sacriston	4842	69	14·25

TABLE 3.

The following were the chief causes of death during the year :—

	Cause.	Death.	Percentage of Total Deaths.
1.	Diseases of Heart ... ... Cerebral Hæmorrhage and ... other Circulatory diseases ...	211	43·8
2.	Cance.	73	15·1
3.	Respiratory Diseases	51	12·7
4.	Tuberculosis (all forms) ...	23	4·7
5.	Violence—2 road traffic deaths. 15 other violent causes. 1 suicide.	18	3.7

TABLE 4.

The age at death is summarised below —

	No. of Deaths.	Percentage of Total Deaths.
Under 1 year	48	9·9
1—5 years	9	1·8
5—15 years	3	0·6
15—25 years	9	1·8
25—45 years	38	7·9
45—65 years	116	24·2
65 years and upwards	259	53·8

Table 5.

The following table shows the classification of deaths from all causes (Registrar General's figures):—

	Causes of death.	Male.	Female.
ALL CAUSES		266	216
1.	Typhoid Fever, etc.	—	—
2.	Cerebro-spinal fever	—	—
3.	Scarlet fever	—	—
4.	Whooping cough	—	—
5.	Diphtheria	—	—
6.	Respiratory tuberculosis	6	8
7.	Other tuberculosis	3	6
8.	Syphilis	1	1
9.	Influenza	1	2
10.	Measles	1	—
11.	Acute Poliomyelitis	1	—
12.	Acute Encephalitis	—	1
13.	Cancer of Buccal cavity, œsophagus and Uterus	3	7
14.	Cancer of Stomach and Duodenum ...	8	14
15.	Cancer of Breast	—	6
16.	Cancer of all other sites	17	18
17.	Diabetes	—	4
18.	Intracranial Vascular lesions	21	19
19.	Heart Disease	96	54
20.	Other diseases of circulatory system ...	14	7
21.	Bronchitis	19	11
22.	Pneumonia	8	8
23.	Other respiratory diseases	1	4
24.	Peptic ulcer	4	1
25.	Diarrhœa under 2 years	6	3
26.	Appendicitis	1	—
27.	Other digestive diseases	2	4
28.	Nephritis	8	8
29.	Puerperal and Post Abortion sepsis ...	—	1
30.	Other maternal causes	—	—
31.	Premature birth	6	6
32.	Congenital malformation	6	4
33.	Suicide	—	1
34.	Road traffic accidents	2	—
35.	Other violent causes	11	4
36.	All other causes	20	14

TABLE 5A.

	1896.	1921.	1947.
Population	58,000	71,580	40,970
Births	2,157	2,298	845
Birth Rate	38·09	31·82	20·6
Deaths	1,083	851	482
Death Rate	19·00	13·03	11·7
Infant Deaths	394	270	48
Infant Mortality Rate ...	182	117	56
Deaths from the 7 principal Zymotic Diseases ...	212	126	3
Scarlet Fever Cases ...	553	378	59
Typhoid Fever Cases ...	108	6	—
Diphtheria Cases	57	130	12

It will be seen from table 5 that there has been no excessive mortality during the year.

The principle causes of death during the year will be found on Table 3.

It is interesting to note there has been a slight reduction in the number of road traffic deaths, but the number of deaths from other violent causes showed an increase. During the year 2 road traffic deaths, and 15 deaths from other violent causes took place. There was one suicide.

Of the total deaths occurring it is useful to observe that over 50% were persons aged 65 and over.

Infant Mortality.

The number of deaths of infants under one year of age registered during the year is 48 and is 7 more than in the previous year. This gives an infant mortality rate of 56, compared with 47 for 1946.

Table 6 on page 13 gives the cause of death in infants under one year of age.

Neo-natal Deaths (deaths occurring during the first month of life) numbered 24, and were responsible for 50% of the total rate. Of this number 19 died in the first week of life, which is equal to 39% of the total rate.

It will be noticed from table 6, that the majority of neo-natal deaths were due to prematurity and congenital malformation, whereas those between one month and twelve months were largely due to the infective diseases, namely chest and bowel conditions.

TABLE 6.

INFANT DEATH ANALYSIS.

CAUSE OF DEATH.	Under 1 week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 4 Weeks.	1—3 months.	3—6 months.	6—9 months.	9—12 months.	Total Deaths under 1 year.
Convulsions	2	.	...	...	2	...	...	...	...	2
Pneumonia	1	...	1		2	4	3	1	...	10
Premature Birth ...	11	...	...	...	11	...	...	...	...	11
Enteritis	..		...	1	1	6	1	1	...	9
Congenital Malformation	2	...	...	...		...	...	...	...	2
Inanition	1	...	...	...	1	...	...	...	...	1
Bronchitis	...	...	...	...	...	1	1	...	. .	2
Accidental Deaths ..	..	...	...		...	...	2	...	...	2
Septicaemia	1	...	...	1	2	2	..	...	...	4
Haematemesis	1	...	...	...	1	..	...	...	...	1
Measles	...	...	...	...	...	...	...	1	...	1
Marasmus	...	1	1	...	2	...	...	...	...	2
Syphilis	...	...	...	...	...	1	...	...	...	1
TOTAL	19	1	2	2	24	14	7	3	...	48

TABLE 7.

Birth-rate, Death-rate and Analysis of Mortality during the year 1947.

	Rate per 1,000 Total Population		Annual Death Rate per 1,000 Population.								Rate per 1,000 Live Births	
	Live Births	Still-births	All Causes	Typhoid and Para-typhoid fevers	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhœa and Enteritis (under Two years)	Total Deaths under One year
England and Wales ...	20·5	0·50	12·0	0·00	0·00	0·01	0·00	0·02	0·01	0·09	5·8	41
126 County Boroughs and Great Towns, including London ...	23·3	0·62	13·0	0·00	0·00	0·02	0·00	0·03	0·01	0·09	8·0	47
148 Smaller Towns Estimated Resident Populations 25,000 to 50,000 at Census 1931	22·2	0·54	11·9	0·00	0·00	0·02	0·00	0·02	0·01	0·08	3·7	36
London	22·7	0·49	12·8	0·00	0·00	0·01	0·00	0·02	0·01	0·08	4·8	37
Chester-le-Street R.D.	20·6	0·63	11·7	0·00	0·00	00·2	0·00	0·00	0·00	0·07	10·6	48

The Maternal mortality rates for England and Wales are as folows:—

	Puerperal Sepsis.	Others.	Total.
per 1,000 Live and Still Births ...	0·26	0·91	1·17

Townships.

The Chester-le-Street Rural District consists of the following townships:—Biddick South, Birtley, Bournmoor, Edmondsley, Harraton, Lambton, Lamesley, Lumley Great, Lumley Little, Ouston, Pelton, Plawsworth, Urpeth, Waldridge and Sacriston.

Population, Acreage, etc., of Townships at end of 1947.

TABLE 8.

Township.	Approx. Population.	Acreage, In acres.	No. of Inhabited houses according to rate book.	Persons per Acre.
Biddick South ...	41	348	11	0·1
Birtley	10,827	1,429	2,902	7·6
Bournmoor	1,773	513	475	3·5
Edmondsley	2,005	2,099	541	1·0
Harraton	3,087	2,669	810	1·2
Lambton	104	697	28	0·2
Lamesley	3,665	6,679	991	0·5
Lumley Great ...	1,406	1,642	370	0·9
Lumley Little	1,435	875	391	1·6
Ouston	1,055	641	283	1·6
Pelton	6,280	926	1,679	6·8
Plawsworth	1,336	1,249	378	1·1
Urpeth	2,371	1,825	624	1·3
Waldridge	752	725	198	1·0
Sacriston	4,842	943	1,327	5·1

SECTION B.—GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

1. Public Health Officers of the Authority.

For a detailed list of the staff of the Public Health Department see page 5.

2. (*a*) Laboratory Facilities.

Pathological and bacteriological specimens are examined at the Public Health Laboratory, Newcastle-on-Tyne, which is administered by a Joint Committee, comprised of representatives of the County Council of Durham, City of Newcastle County Boroughs of Gateshead and Tynemouth.

During the year, the following bacteriological examinations were caried out with the result appended :

Disease.	Positive.	Negative.	Totals.
Diphtheria	5	33	38
Tuberculosis	57	109	166
Typhoid, Dysentery, and Food Poisoning Organisms	6	19	25

The total number of samples examined is equal to a rate of 5.6 per 1,000 of the population.

3. Ambulance Facilities. Nursing in the Home. Clinics & Treatment Centres. Hospitals, Public & Voluntary.

Arrangements and facilities are the same as set out in last year's report.

SECTION C.—SANITARY CIRCUMSTANCES OF THE AREA.

1. Water.

Water is supplied to the district from three water undertakings, Durham County Water Board, The Newcastle and Gateshead Water Company, and the National Coal Board (Lambton, Hetton & Joicey Group). The Water supplied by the two latter undertakings has been satisfactory in quality and quantity. Unfortunately the same cannot be said of the supply of the Durham County Water Board, the quality, and in some parts of the district quantity of which leaves much to be desired,

50% of the samples of water taken from within the Board's supply area were reported by the bacteriologist as being unsatisfactory. Because of this and after permission had been obtained from the Ministry of Health, consumers of water supplied by the Durham County Water Board were advised by posters and press notices to boil all water for drinking and cooking purposes. This instruction is still in operation. I understand the Durham County Water Board have submitted proposals to the Ministry of Health to increase the filteration and sterilisation plants at Waskerley and Honey Hill reservoirs, and for added sterilisation at local points throughout their supply area. It is hoped in this way to improve the quality of the water. With regard to quantity of the Board's supply over a number of years there has been insufficient supplies to the Beamish, West Pelton and Pelton Areas in this district. I am informed that this is

due to the inadequancy of the mains, which frequently suffer as a result of collery subsidence in the supply areas concerned, and the remedy lies in the relayng of mains.

A scheme I am informed is being considered to lay a new 5″ main Greencroft to Chester-le-Street to overcome this inadequancy of supply.

Extension of mains were carried out in the Old Barley Mow supply area for new Housing Development there.

At Fatfield a new full-bore meter was installed by the National Coal Board to replace the old 1½″ meter, since which time no complaints have been received of poor pressure. The supply is constant and of good quality.

In the Lumley area no extension of supply were carried out. This supply is now functioning satisfactorily and complaints of inadequate supply are few.

The Durham County Water Board propose to take over from the Council the Lumley supply in accordance with their statutory rights and the Council have asked them also to take over the responsibility for the supply to Old Barley Mow. This latter proposal necessitates the Board seeking an extension of their limits of supply.

With few exceptions it may be said that the district has a piped supply of water direct to the house Several isolated cottages in outlying areas not being within reasonable distance of the mains have to depend on springs or wells. These supplies have however been analysed and found satisfactory.

Samples of water are taken at monthly intervals from different points in the supply area of each water undertaking and submitted to the Public Health Laboratory, Newcastle, for bacteriogical examination. 78 samples were taken during the year, and of that number 21 or 27% were reported as being unsatisfactory.. Copies of the report were sent to the body concerned and where the sample was reported as unsatisfactory a letter was sent asking for immediate steps to be taken to render the supply pure and wholesome. Check samples were taken following a bad sample and generally this sample proved to be satisfactory. The following are the results of the samples taken during the year :

	Satisfactory.	Unsatisfactory.
D.C.W.B.	11	15
Newcastle & Gateshead Water Co.	8	5
N.C.B. (Lambton Hetton Group).	16	5
Chester-le-Street R.D.C. ...	14	5
Public Swimming Baths. ...	13	1

No chemical analysis were undertaken during the year.

The following table shows the number of houses which have not water laid on; their means of supply, and the distribution in Parishes.

	Standpipes.	Springs.	Wells.
Birtley ...	60	—	—
Lamesley ...	4	14	3
Urpeth ...	15	8	2
Edmondsley ...	—	4	—
Sacriston ...	—	1	—

2. Drainage and Sewerage.

The Surveyor to the Council has supplied me with the following information :

Various extensions of sewers totally approximately 1½ miles were laid and many defective sections relaid during the year.

The Consulting Engineers have just reported (September 1948) on the schemes for connecting Waldridge and Grange Villa areas to the outfall sewers leading to Chester-le-Street Urban District Council's Sewage Works. In addition a scheme is proposed for pumping the sewage from the Fence Houses and New Lambton areas to the Sedgeletch Works of Houghton Urban District Council. The scheme for dealing with the northern half of the district comprises new pumping stations and mains and the relaying of the main outfall to the River Tyne.

3. Closet Accommodation.

No general scheme of conversions has been possible during 1947. As soon as the building restrictions are lifted, the scheme to clear up those remaining to be converted throughout the district will be prepared.

Water closets	10,189.
Earth closets	1,746.
Privies.	240.

4. Public Cleansing.

(*a*) The Public Cleansing Service was extended to include all the Council's Transport and at the moment there are 11 Scavenging Vehicles and 8 lorries together with 2 vans. The standard of refuse collection is high, bins being emptied twice and ashpits once per week. The conversion of these ashpits and the provision of bins would assist collections considerably. The Council are considering the question of taking over the supply and maintenance of all ashbins in the district.

Disposal of refuse is by controlled tipping over a series of small tips.

(*b*) Salvage, now an integral part of the duties of the Cleansing Department was collected during the year as follows:

	T.	C.
Paper ...	48	19
Rags, Carpets, Sacking	5	1
Metals ...	14	11
Copper ...	—	18
Lead ...	—	8¼
Brass ...	—	3¼
	70	1½

5. Housing (Rural Workers) Act.

No further applications for grant were permissible after 30th September 1945.

6. SANITARY INSPECTION OF THE AREA.

TABLE 9.

PUBLIC HEALTH ACTS.

Summary of Notices Served:—

DESCRIPTION.	Number of Informal Notices Served.	Number of Formal Notices Served.	Number of Notices Complied With.
Foul Conditions	14	—	12
Structural Defects	324	1	245
Overcrowding	—	—	—
Dairies and Milk Shops	2	—	2
Cowsheds	9	—	9
Bakehouses	4	—	4
Ashpits and Privies	18	—	12
Deposits of Refuse and Manure ...	2	—	2
Water Closets	8	—	8
Defective Yard Paving	—	—	—
,, Traps	1	—	1
,, Drains	33	—	31
,, Water Supplies ...	15	—	15
Pigsties	2	—	2
Dust Bins	10	—	7
Insufficient Sanitary Accommodation	—	—	—
Other Nuisances	4	—	39
Smoke	8	—	2
	484	1	391

TABLE 10.

SUMMARY OF WORKS CARRIED OUT.

Roofs repaired	132
Chimney Stacks repaired ...	14
External walls repaired	46
Internal walls repaired	93
Ceilings repaired	40
Windows repaired	116
Floors repaired	31
Doors repaired	10
Spouting repaired	49
New Drains Laid	40
Drains repaired	50
Inspection chambers built ...	83
Kitchen ranges repaired ...	43
Water Closets repaired and constructed	40
Waste Pipes repaired	14
Water Supplies repaired ...	17
Outhouses repaired	26
Bath Rooms provided	4
Slopstone Sinks provided ...	—
do do repaired ...	14
Accumulation of refuse etc. removed	2
Yards repaired	5
Ash Closets repaired	—
Foul conditions remedied ...	12
Bins provided	41
Stairs repaired	—
Additional accommodation provided	—
Vent shafts erected	—
E.C's. Converted into W.C's. ...	10
Septic tanks constructed ...	2
Pantries repaired	4
Cowsheds cleansed	6

(*a*) Petroleum Consolidated Act, 1928.

37 licences were issued during the year for the storage of 40,910 gallons of petrol. 11 licences were issued for the storage of 607 tons 14 cwt. 4 st. of c alcium carbide. and one licence was granted for the storage of 5 gallons of Naphtha.

(b) PLACES OF PUBLIC ENTERTAIMENT.
Cinemas, Public Houses, etc.

Inspections have been made of cinemas and public houses in the area, and in two instances it was found that the Sanitary accommodation for each sex was below the required standard. These cases were taken up, and works have now been carried out to bring these premises up to standard.

It was hoped to make a detailed examination of the atmospheric conditions in the cinemas by the use of the Katathermometer, but unfortunately this equipment did not come to hand, and it is hoped that this procedure will be carried out in the forthcoming year.

(c) Rats and Mice (Destructional) Act, 1919.

Under Infestation Order 1943, S.R. & O 680, the County Council delegated powers and duties under the above Act to the Rural District Council.

Out of a total of 10,833 premises, 9,446 domestic houses and 294 Business Premises were surveyed for rats and mice of which 107 premises were found to be infested.

The result of this treatment was an estimated kill of 397 rats.

14 allotments were treated, with an estimated kill of 249 rats. 10 refuse tips and 8 sewage disposal works in the area gave an estimated kill of 1,778 rats.

Of the river banks and burns, 7 major and 3 minor infestations estimated kill of 474 rats.

Granaries and fodder houses throughout the area have been responsible for a kill of 412 rats.

The sewer manholes have had 2 treatments, and gave an estimated kill of 1,107 rats in May 1937, and 385 killed in December 1947 treatment.

Private Dwellings - Special Scheme 1946-48.

The following is a complete report on the Private Dwellings Special Scheme 1946-48, since its inception by your Authority in May 1946.

The Council of this Authority is responsible for an area of 23,261 acres, in which are included Villages, Collieries, Factories, Business Premises, Allotments, Quaries, Refuse Tips, Sewage Works, Sewers, Burns and River Banks.

The Scheme was accepted in May 1946, and work was commenced in the following September. Owing to the amount of work entailed, it was impossible for the Rodent Offieer to complete the scheme for

the fiscal year ending March 1947, the Ministry of Food Infestation Department having in the meantime granted another years extension to local Authorities to complete the scheme for the fiscal year ending March 1948.

After consulting your Medical Officer, Dr. Millar, it was agreed, (subject to your approval), that in order to facilitate and complete the sche ne it would be necessary to employ additional men.

As you are already aware four men were employed. A comprehensive sheme to inspect and treat the whole built up area was submitted.

The 13 Parishes under the Council's jurisdiction were divided into 1st Areas, 2nd Sub-areas, 3rd Section and 4th Blocks.

Out of a total of 10,833 premises; 9,466 domestic houses and 293 business premises were surveyed for rats and mice; 107 premises were found to be infested.

The result of this treatment was an estimated kill of 397 rats and hundreds of mice.

The assistance of allotment holders throughout the area and their co-operation was readily given. Fourteen allotments were treated with an estimated kill of 246 rats.

Treatmen· of the 10 refuse tips and 8 sewage disposal works in the area showed th·t the larger part of the rat population was concentrated here; the results of treatment was an estimated kill of 1,778 rats. Steps are being taken to keep these places under close observation to ensure that there is no build up in the rat population.

Of the river banks and burns, we have dealt with seven major and three minor infestions - estimated kill 474 rats. Close watch is also kept on these sites to prevent a built up.

Granariesand Fodder houses throughout the area which received maintenance treatment have been responsible for a kill of 412 rats.

Factories of which there are seven, and situated in Birtley have their own servicing squads to keep down rodents.

In view of the many farms in the area, control treatments involving farm land was readily given by the D.C.W.A.C.

The sewers have had three treaments since the appointment of the Rodent Officer, making this the fifth treatment; one more has to be undertaken in February 1948 to qualify for the Government Grant. In the first two treatments the whole network of sewer manholes throughout the area was undertaken, consequently the remaining treatments involve only the infested areas with a test bait of 10% of non-infested manholes. Under systematic control the rat population will rapidly decrease.

May I be allowed to say in conclusion, that although it is nearly impossible to get rid of every rat in this Authority, we do our best to keep them down to the lowest minimum possible. Every case reported is carefully surveyed and treated, then recorded for reference.

I can safely say that the Rodent menace throughout the Rural Area is safely under control, and that we are able to deal with any bad signs of infestation immediately.

6. Swimming Baths and Pools.

Regular sampling of the water of the two swimming baths in the district has taken place during the year. 14 samples of water were taken, of that number 1 was reported as being unsatisfactory. The cause of the unsatisfactory sample was investigated, found and immediately remedied. I wish to pay a tribute to the two Baths Superintendents for their diligence and co-operation. They are to be commended on the cleanliness of the baths, the condition of the water, and the control of th large number of swimmers they have passed through the pools.

We in this district are fortunate in having such facilites available, and it is to be hoped that when materials and labour are in better supply every township will have its own swimming pool incorporated in a civic centre. There adult and child alike can enjoy healthy excercise and relaxation, a very necessary amenity in these days of rush and scurry.

7. Disinfestation, Eradication of Bed Bugs., Flies etc.

Many houses were found to be infested, and have been dealt with. The iniquity of bug infestation is that the innocent frequently suffer for the misdeeds of the guilty because the bed bug is no respector of persons, and quickly finds its way from a dirty house to the clean adjoining next door house, frequently in fact making its presence felt in a whole row of houses.

Whilst the bed bug is not yet incriminated in the propagation of disease, it is frequently the cause of much ill health, especially among children. The bed bug visits at night, disturbs the sleep by the irritation it sets up, and sucks blood which may lead in the long run to anæmia.

The Public Health Official is now fortunate in having a powerfu ally of proven value in in the insecticide D.D.T. Happily D.D.T. is harmless to man, but spells certain death to the bed bug. To rid a house of these pests is now a comparatively easy matter, provided the Health Department is informed of the presence of infestation. An appeal is therefore made to the public to inform the Department

concerned of any case of infestation. no matter, how slight this may appear to be.

The method used in this district for the eradication of bed bugs is to spray the inside walls, ceilings and floor of the property with a 5% solution of D.D.T. Infested bedding is treated by steam disinfection and soft furnishings are dusted with D.D.T. powder. So far the results obtained have been excellent, and it is rarely necessary to spray a second time. Another feature of D.D.T. treatment is that it remains active for three months, thereby ensuring a complete destruction of the pests.

As a further precaution, each new house is treated with Gammexane, being a recent discovery which is a more powerful insecticide than D.D.T.

In view of the incidence of poliomyelitis in the area, measures of control have been taken. Ponds ditches and refuse tips have been inspected for mosquitoes and flies. Two sets of ponds proved to be heavily infested with mosquitoes; these have been treated.

The Cleansing Department are systematically dozing their refuse tips with insecticide, to prevent the breeding of flies, etc.

From 23rd July to 31st December, 1946, 48 Minor, and 18 Major infestations were successfully treated, and 8 lots of bedding were steam disinfected.

D.D.T. is also useful against the house fly.

8. Schools

School closure to check the spread of infectious disease was not necessary during the year.

New schools are urgently required at Eighton Banks, Kibblesworth, West Pelton and Edmondsley. The existing schools in these areas are to say the least far from satisfactory.

9. Smoke Abatement.

As from July, observations have been carried out in the Rural Area, and whilst the present legal position is difficult, it is pleasing to note that improvement has taken place.

Section D.—Housing.

It gives great satisfaction to report that during the year the following houses were completed and tenanted, relieving quite a number of families of their housing problem

52 relets.
101 Temporary houses.
62 Permanent houses.

The 215 families involved, relieved the following conditions:

55 Condemned houses emptied.
179 Overcrowded families.
35 Tuberculosis cases.
28 Other diseases.
102 More than 1 family in the house.

Statistics were compiled with regard to the housing of miners, and it was found that approximaely 50% were allocated to them.

52 exchanges were granted, which in the majority of cases gave relief to overcrowding, the remainder were for Health reasons etc.

Families continue to occupy the Nissen type huts previously occupied by the army, iucluding the Quarry, Drill Hall and N.F.S. Hut, Birtley, but the Local Authority still refuse to requisition these on behalf of the Ministry of Health, as they are still of the opinion that these Nissen Type huts are unfit for human habitation.

Steps have been taken to protect the public Health by providing essential services.

2,731 houses are overcrowded, and this compares unfavourably with the figures obtained in 1936 as a result of the Overcrowding Survey under the Housing Act, 1935 In 1936, 1,556 were overcrowded from a total of 11,766 houses examined, giving a percentage of overcrowding of 13·2 At the present time 2,731 houses are overcrowded equal to 25 per cent. of the houses examined.

New houses are still urgently required in the district, and there seems little doubt that until a considerably increased number are built, the housing conditions for many of the inhabitants will continue to remain deplorable.

Section E.—INSPECTION AND SUPERVISION OF FOOD.

(*a*) Milk Supply.

Your Sanitary Inspectors regularly visit cowsheds, dairies and milk shops in the district to ensure that everything is done to assist in producing a clean milk supply. There are in the area 61 producers, of whom 1 is producing certified, 18 accredited, and 42 ordinary milk, and 10 purveyors of milk.

(*b*) Ice Cream.

11 samples of ice cream were taken by the Sanitary Inspectors during the year, and submitted to the Public Health Laboratory for

bacteriological examination. Three of the samples were satisfactory, which is an improvement on the previous year.

The vans throughout the area have been checked for washing facilities and cleansing of utensils.

There is only one producer of ice cream in your district, and steps were taken during the year to have his premises reconstructed, so that a better product would be produced.

The Ice cream Heat Treating Regulations 1947, which became operative on 1st May, 1947 have been a subject of amendment owing to the difficulty which producers have been finding in obtaining the necessary cooling apparatus to enable them to conform with the requirements of the above Regulation.

Certain gradings of ice cream have been suggested by a Sub-Committee of the emergency Public Health Laboratory Service for the testing of ice cream by Methlyene Blue, and it is believed that this method would prove valuable if adopted, so that ice cream producers with persistently low standard grading could be dealt with. It is imperative that some definitive bacteriological standard for ice cream should be laid down, since the introduction of such legislation would be of great value in safe-guarding the interest of the Public Health with regard to such an important product.

B. Meats and other Foods.

The slaughter of all animals for both urban and rural areas is carried out at the Government Regional Slaughter House on the premises of the Chester-le-Street Co-operative Society.

The inspection of meat slaughtered is undertaken by the three Sanitary Inspectors of the Urban and Rural districts in weekly rotas. The scheme works satisfactorily, and harmony exists between the Inspectors and the management of the Slaughter House.

Unfortunately there is no improvement, for either killing or inspection, and repeated complaints have not brought about the desired improvements. Killing of all classes of animals is carried out in the same hall as the cooling and inspection is done, and congestion of all kinds of carcases and offals renders the work of inspection very difficult.

The whole of the premises require remodelling, with separate apartments for killing, cooling and inspection, and proper facilities provided for the hanging of carcases and offals, so that the various organs and and carcases can be identified.

Sanitary accommodation and wash basins with towels and soap should be provided. Proper receptacles for the reception of manure

and waste, which at present is dumped in the yard immediately outside the slaughter house door are also very necessary requirements.

Immediate attention should be given to the reconstruction of the above property in interests of health and hygiene.

All carcases and offals are inspected immediately after slaughter, and the work is carried out as efficiently as the circumstances permit. Condemned meat and offals are dealt with in accordance with the instruction of the Ministry of Food.

During the year 4 licences were issued under the Slaughter of Animals Act of 1933 to slaughtermen.

The following carcases and offals were inspected during the year:

Bulls	...	11
Cows	...	212
Steers	...	576
Heifers	...	415
Calves	...	96
Sheep	...	4141
Pigs	...	65
		5516

The following meat and other foods were condemned and dealt with in accordance with the instructions of the Ministry of Food.

	Stns.	lb.	ozs.
Beef	349	9	0
Mutton	4	2	0
Heads and Tongues ...	31	5	0
Lungs	51	1	0
Livers	273	7	0
Plucks	2	5	0
Hearts		—	
Skirts		—	
Kidneys		—	
Guts		9	0
Fat	96	1	0
Tripe	2	2	0
Manifold		—	
Spleen		—	
Tail		—	
Udders	9	5	0
Pork	24	4	0
	853	4	0

Total weight: 5 ton, 6 cwt., 5 st., 4 lbs. 0 ozs.

OTHER FOODS:	Stns.	lbs.	ozs.
Tinned Meat	55	7	5
,, Vegetables ...	13	8	15
,, Cereals ...		2	4
,, Milk	16	9	1
,, Preserves ...		9	8
,, Fruit	7	5	1
,, Fish	2	2	0
,, Soup		2	0
,, Syrup		1	0
Fish	6	2	0
Jars Pickles	3	3	0
Fruit Pudding		2	4
Meat Rolls and Sausage ...	4	3	1
Bacon	1	4	4
Beans	13	12	0
Biscuits	2	2	0
Sugar		1	0
Cheese		1	0
Tongues			8
Beef	8	3	0
Fruit	7	4	0
Peas	8	0	8
Tea		12	8
Butter	13	3	2
Cereals	52	9	8
Flour	4	8	0
Baking Powder ...	1	0	0
Dried Egg	1	5	8
Chocolate	2	0	12
Eggs 1,127			
Total.	226	13	8

Total weight: 2 tons, 16 cwt., 2 st., 13 lbs., 8 ozs.

C. Adulteration.

Durham County Council is the body responsible for administration of the Food and Drugs Act (Adulteration Act), 1928 etc.

Section F.—PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

735 notifications of infectious disease were received during the year, compared with 678 in the previous year and 1,103 in 1945. Measles was responsible for 406 notifications, as opposed to 233 in 1946. In 35 cases diagnosis was not confirmed.

The following table gives the number of cases notified during the past ten years:

TABLE 11.

DISEASE.	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947
Smallpox	..	...	...	...	...	...	...	...	...	...
Scarlet Fever	226	43	50	64	111	144	93	70	49	59
Diphtheria	108	90	69	82	104	113	115	60	36	12
Enteric Fever	...	1	...	3	...	...	...	...	...	...
Cerebro Spinal Fever ...	...	1	4	10	7	6	7	5	10	9
Poliomyelitis	...	...	...	...	...	...	...	...	...	13
Encephalitis Lethargica ...	...	...	...	...	...	...	...	...	...	...
Pneumonia	69	...	78	81	97	90	126	83	94	70
Puerperal Fever	...	...	...	...	...	...	...	...	...	...
Puerperal Pyrexia	12	11	7	8	5	7	3	5	2	7
Erysipelas	50	20	24	26	25	37	24	25	11	8
Ophthalmia Neonatorum ...	2	6	4	2	4	5	7	2	1	2
Dysentery	...	...	...	...	...	...	4	...	1	2
Tuberculosis- Pulmonary ...	40	44	38	45	47	26	36	33	58	55
,, Non-pulmonary...	35	26	17	20	21	17	14	10	22	20
*Measles	...	6	1033	185	470	335	253	648	233	406
*Whooping Cough	...	32	34	190	56	96	88	95	131	37
†Diagnosis not confirmed ...	...	...	...	...	...	...	68	42	30	35

*From November 13th, 1939 only.

†Due to Quarterly Infectious Return.

TABLE 12.

Infectious Disease, 1947.

NOTIFIABLE DISEASES.	AT AGES—YEARS.								JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER
	Under 1	1 to 5	6 to 15	16 to 25	26 to 45	46 to 65	66 up.	At all Ages.									
Diphtheria	1	8	5	1	1	1	...	12	1	1	1	...	1	5	...	1	.
Encephalitis Lethargica...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	.
Enteric Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..
Erysipelas	...	...	...	...	3	3	2	8	1	4	...	...	...	2	...	...	.
Ophthalmia	2	...	...	...	...	...	...	2	...	...	...	...	...	1	...	...	
Pneumonia	7	21	8	4	9	14	7	70	12	8	13	7	8	5	2	2	..
Puerperal Fever ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..
Puerperal Pyrexia ...	...	...	...	5	2	...	...	7	1	...	1	...	1	1	...	1	..
Scarlet Fever	1	18	34	5	1	...	...	59	2	...	3	6	3	2	6	4	
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..
Tuberculosis—Pulmonary	...	1	4	22	16	11	1	55	8	10	2	2	5	1	6	...	
do Non-Pulmonary	...	8	4	3	3	2	...	20	...	3	3	1	5	...	4	...	..
Cerebro Spinal Meningitis	...	4	3	1	1	...	...	9	1	...	2	...	2	1	2	...	
Dysentery	...	...	...	...	1	1	...	2	...	...	...	...	...	...	2	...	..
Poliomyclitis	...	5	4	2	...	...	...	11	...	...	...	...	...	...	3	4	
Polioencephalitis ...	...	...	1	1	...	...	...	2	...	...	...	...	...	...	...	2	..
Diagnosis not Established	2	12	11	7	3	...	...	35	3	3	5	5	4	2	2	...	
.....	...	...	...	...	...	...	...	.....	...	..	...	..	...	...	...	...	..
TOTALS	13	72	74	51	40	32	10	292	29	29	30	21	29	20	27	14	1

TABLE 12 (continued).

November	December	Townships, Biddick, South	Birtley	Bournmoor	Edmondsley	Harraton	Lambton	Lamesley	Lumley Great	Lumley Little	Ouston	Pelton	Plawsworth	Urpeth	Waldridge	Sacriston	Total Number Notified.	Removed to Hospital.
2	...	...	...	1	1	...	...	...	...	...	2	...	2	1	...	5	12	12
....	...	...	...	...	...	...	..	...	...	...	..	...	...	...	...	..	...	...
....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
....	1	...	1	...	...	2	2	1	...	2	...	...	...	...	...	...	8	...
...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	2	1
1	10	1	15	1	2	10	1	5	...	4	1	7	2	...	...	21	70	24
....	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...
...	1	...	...	...	...	...	...	1	1	...	...	1	1	...	...	3	7	6
12	12	...	17	...	1	11	...	4	2	...	1	15	...	1	...	7	59	58
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
6	5	...	22	1	2	6	...	3	..	6	2	10	1	...	...	2	55	...
1	1	...	11	...	1	...	...	3	..	...	...	1	...	1	1	2	20	...
....	...	...	5	...	...	1	1	...	...	...	...	1	...	...	...	1	9	9
...	...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	...	2	2
...	...	...	4	...	1	2	...	...	...	...	...	...	...	3	...	1	11	11
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	2	2
3	4	...	8	2	1	2	...	2	...	1	...	3	1	...	...	15	35	35
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
25	34	1	84	6	9	35	4	19	4	14	6	38	7	6	1	58	292	160

The attack rates of the notifiable diseases per 1,000 of the population for the Rural District, compared with the rates for England and Wales are shown on the following table:—

Disease.	Chester-le-Street Rural District.	England and Wales.
Scarlet Fever	1.44	1.37
Diphtheria	0.29	0.13
Typhoid	—	0.01
Paratyphoid	—	0.01
Erysipelas	0.19	0.19
Pneumonia	1.70	0.79
Cerebro Spinal Fever... ...	0.21	0.05
Whooping Cough	0.90	2.22
Measles	9.90	9.41

Prevalence of notifiable diseases in the various townships is shown in the following table, which gives the attack rate per 1,000 of the population:—

TABLE 13.

Township.	Scarlet Fever.	Diphtheria.	Pneumonia.	Erysipelas.
Biddick South	—	—	24.39	—
Birtley	1.57	—	1.38	0.09
Bournmoor	—	0.56	0.56	—
Edmondsley	0.49	0.49	0.99	—
Harraton	3.57	—	3.25	0.65
Lambton	—	—	9.62	9.23
Lamesley	1.09	—	1.36	0.27
Lumley Great	1.42	—	—	—
Lumley Little			2.79	1.40
Ouston	0.95	1.90	0.95	
Pelton	2.39	—	1.12	—
Plawsworth		1.50	1.50	—
Urpeth	0.42	0.42	—	—
Waldridge		—	—	—
Sacriston	1.45	1.03	4.34	—

Scarlet Fever.

59 cases of Scarlet Fever were notified compared with 49 in 1946 This is equivalent to an attack rate of 1.44 per 1,000 of the population.

58 of the cases were treated in Hospital, where the average duration of stay was 28 days.

Diphtheria.

The disease generally is of a mild type, and unless there are special circumstances appertaining in the household, i. e. a recent confinement or where any member of the household is engaged in the handling of food or milk, the majority of cases of scarlet fever could very well be treated at home, provided that satisfactory isolation can be arranged.

It is very pleasant to report that a substantial reduction in the incidence of diphtheria occurred during the year, as compared with the previous year which was in itself a new low level, and there seems little doubt that this satisfactory state of affairs must be in large measure attributed to the effects of the widespread immunisation in the Rural Area. Notifications were received in respect of 12 cases only.

Morbidity and mortality figures certainly prove the advantage of the protected over the unprotected children. No effort has been spared during the year to bring to the notice of parents the advantage of immunisation.

Up to the end of December 1947, the following was the position in relation to immunisation :—

3,557 children under 5 years of age protected, or 34% of susceptible child population.

6,091 children between 5-15 years of age protected, or 81% of susceptible child population.

If all susceptible children were protected against Diphtheria by immunisation, then diphtheria would cease to be a Public Health problem. Every effort is being made to attain the desired minimum of protection of 90 per cent of the susceptible child population.

The best time for children to be protected against Diphtheria by immunisation, is between 6 months and 1 year of age, and it is now strongly recommended by the Ministry of Health that a strengthening dose be given before the child starts school. In this way, protection is kept at its highest level.

All cases of diphtheria were admitted to the Isolation Hospital for treatment and there were no deaths.

Diphtheria anti-toxin is issued to Medical Practitioners by the Local Authority for use in all cases of Diphtheria or any suspected throats in the district.

Swabs from the throats in all doubtful cases can be taken by the General Practitioner and submitted to the Public Health Laboratory for examination and report. This is a free service, paid for by the County Council.

The introduction of chemotherapy and penicillin has done much to reduce mortality from Diphtheria, but the older method of treatment with anti-toxin must still be used. The earlier anti-toxin is administered, the greater are the chances of recovery.

The fall in the incidence of Diphtheria, whether as a result of immunisation or a periodic variation in the incidence of disease, may in the future lead to a problem in the best utilisation of Isolation Hospital accommodation. If the reduction in the number of cases continues, then valuable beds will be available for other types of disease, which would benefit by treatment in hospital, especially if the homes they occupy are overcrowded.

Pneumonia.

70 notifications of pneumonia were received during the year, as against 94 in the previous year. 24 of the cases were treated in Hospital, and 16 deaths were registered, as against 22 in 1946.

The treatment of pneumonia has undergone radical change since the introduction of the sulphonamide group of drugs and penicillin. The duration of toxaemia and the length of illness are markedly shortened with the use of these drugs, and the well-being of the patient helped enormously. This in turn again relieves hospital beds, although pnevmonia is a disease which is eminently suitable for treatment in hospital.

Enteric Fever.

No cases of this disease were notified during the year.

The strictest watch continues to be kept on the purity of water supplies, the cleanliness of milk and ice cream. The greatest stress is placed on the necessity of scrupulous cleanliness in food handlers.

Cerebro-spinal Fever.

9 cases of cerebro-spinal fever were notified during the year, compared with 10 for the previous year, and all of these cases were admitted to the isolation hospital for treatment.

This disease is spread by droplet infection, and is most prevalent in the winter months. Fortunately to offset the increased incidence of disease, there is now a group of drugs capable of treating this disease and the mortality has been reduced practically to nil. The

drugs referred to are the chemotherapeutic agents and antibiotics, and the fact that no deaths were again recorded during the year from cerebrospinal fever, speaks volumes for their continues efficacy, in dealing with this disease.

Measles & Whooping Cough.

During the year 406 notifications of measles and 37 of Whooping Cough were received.

These diseases are responsible for much morbidity and mortality in childhood, and there is much to be said for the admission of complicated cases to hospital if home conditions are bad, where they can, receive expert treatment, especially by the chemotherapeutic agents now available.

One death was registered in the district from measles, and considering the number of cases notified, this is a tribute to the efficiency of modern drugs.

Cancer.

73 deaths were registered during the year as being due to cancer, which is equal to a death rate of 1.77 per 1000 of the population. The death rate from this disease shows some increase on the previous year.

Of the 73 deaths 28 occurred in males, and 45 in females. No undue occupational prevalance was noted, but the need is again stressed for continued research, in an effort to control the ravages of this dread disease.

See Table 14 on page 36 which gives the sites and age grouping of the deaths from cancer.

Tuberculosis.

No action was taken during the year under the Public Health (Prevention of Tuberculosis) Regulation, 1925 (relating to persons suffering from pulmonary tuberculosis employed in the milk trade) or under section 172 of the Public Health Act, 1936 (relating to the compulsory removal to hospital of persons suffering from tuberculosis

TABLE 14.

CANCER DEATHS (Age Groups and Sites).

AGE GROUP	Buccal Cavity		Stomach, Liver, etc.		Peritoneum, Intestines Rectum, etc.		Skin		Lungs		Breast	Female Genital Organs	Prostate and Bladder		TOTAL	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	F.	F.	M.	F.	M.	F.
5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
20—	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...
25 —	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
35—	...	..	...	...	...	1	...	...	...	..	1	1	...	...	...	3
45—	...	...	...	...	1	...	...	...	1	1	...	.	...	...	2	1
50—	2	...	1	...	1	1	...	...	2	...	1	1	...	...	6	3
55—	1	...	1	5	1	...	...	.	...	...	1	1	...	...	3	7
60 —	...	...	...	...	1	1	..	...	...	1	1	2	1	...	2	5
65 and upwards	1	1	7	7	3	10		1	1	.	3	4	2	...	14	26
TOTAL	4	1	9	12	8	13	...	1	4	2	7	9	3	..	28	45

New cases and mortality from Tuberculosis during 1947 :—

TABLE 15.

Age Periods.	New Cases.				Deaths,			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
1— 5 ...	1	...	5	3	...	...	2	3
5—15 ...	1	2	...	4	...	...	...	...
15—25 ...	9	12	2	2	2	2	...	1
25—35 ...	5	5	...	2	3	3	...	...
35—45 ...	4	3	...	1	...	1	1	1
45—55 ...	7	3	...	...	2	...	...	...
55—65 ...	1	1	...	1	...	...	...	1
65 and over ...	1	...	...	...	1	...	...	...
	...	...	...	...	...	...	...	...
Totals ...	29	26	7	13	8	6	3	6

The following table gives the notification and deaths occurring in the Rural District during the past five years.

TABLE 16.

Year.	Pulmonary Tuberculosis. Notifications.	Deaths.	Non-Pulmonary. Notifications.	Deaths.
1943	26	24	17	2
1944	46	17	14	5
1945	33	25	10	2
1946	58	19	22	5
1947	55	14	20	9

Reference to Table 16, reveals that there has been a slight reduction both in the incidence of primary notification and deaths from pulmonary tuberculosis during the year. A slight reduction has also occurred in primary notification of non-pulmonary tuberculosis, although the mortality from the latter shows some slight increase on last years figures.

The Local Authority supplies disinfectants to tuberculous persons for the disinfection of sputum and the washing of floors, etc.

It will be seen from table 16, that there has been a considerable increase in the number of notifications, of both pulmonary and non-pulmonary forms of the disease. The number of deaths in Pulmonary Tuberculosis has been reduced, but there has been a slight increase in the deaths registered from non-pulmonary tuberculosis.

Reduction in the incidence of tuberculosis, cannot be looked for until housing conditions of many of the people are improved, and overcrowding relieved. It is an unsatisfactory state of affairs to have an open case of tuberculosis occupying an overcrowded house. This inevitably leads to infection of other members of the household, and can only be relieved by rechousing or the removal of the open case of tuberculosis to hospital. The latter is not always easy, as there is not at the moment sufficient beds for the adult advanced case. of pulmonary tuberculosis.

Improved methods in the earlier detection of cases is undoubtedly responsible for an increase in the number of notifications received. This is all to the good, because it ensures for the unfortunate individual earlier treatment, with greater hope of recovery, and less danger to the immediate relatives.

During the year continued research has been carried out in the use of the antibiotic agent streptomycin, and although there is still much to be learned regarding this drug, there seems little doubt that it is now regarded as essential in the treatment of military T.B.; T.B. Mennigitis; and acute pulmonary tuberculosis; and it may be that this drug will eventually occupy a very important place in the treatment of Tuberculosis.

The reduction of tuberculosis from milk herds would do much to reduce the number of cases of non-pulmonary tuberculosis in children and it is hoped that soon only two types of milk will be sold to the public, Tuberculin tested and Pasteurised, ensuring thereby a safe milk free from the Tubercle Bacillus.

Scabies.

The treatment of scabies contnued at the Elisabethville School and was on the same lines as laid down in previous reports.

Poliomyelitis.

In common with other districts, the Chester-le-Street Rural Area shared in epidemic of poliomyelitis, but it is fortunate that only 11 cases were notified in your area, which gives an attack rate of 0.3 per 1,000. It is regretted that one death occurred.

In the main the cases were for the most part of the paralytic type, and after treatment in the Chester-le-Street Isolation Hospital, and when cases were considered to be non-infective, they were transferred to Dryburn Emergency Hospital, Durham, for the necessary orthopaedic treatment and supervision.

It is likely that during the epidemic period a considerable number of carriers must have existed in the General population, and many abortive cases were occurring which never reached the stage for notification. A careful watch is being maintained for any tendency towards a further outbreak in the area.